



## UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS  
UNITED STATES PATENT AND TRADEMARK OFFICE  
WASHINGTON, D.C. 20231  
www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 5984

<b>SERIAL NUMBER</b> 09/442,517	<b>FILING DATE</b> 11/18/1999 <b>RULE</b>	<b>CLASS</b> 709	<b>GROUP ART UNIT</b> 2153	<b>ATTORNEY DOCKET NO.</b> 027060.0011.UTL
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## APPLICANTS

DAVID BRADLEY RUST, SANDIEGO, CA;

\*\* CONTINUING DATA \*\*\*\*\*

none MMM

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

none MMM

IF REQUIRED, FOREIGN FILING LICENSE  
GRANTED \*\* 12/21/1999

\*\* SMALL ENTITY \*\*

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 8	<b>TOTAL CLAIMS</b> 16	<b>INDEPENDENT CLAIMS</b> 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature <u>MMM</u>	Initials		

## ADDRESS

23865

## TITLE

SYSTEM AND MEHTOD FOR APPLICATION VIEWING THROUGH COLLABORATIVE WEB BROWSING SESSION

<b>FILING FEE RECEIVED</b> 438	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees ( Filing )
		<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )
		<input type="checkbox"/> 1.18 Fees ( Issue )
		<input type="checkbox"/> Other _____
		<input type="checkbox"/> Credit

SERIAL NUMBER <div style="text-align: center;">09/442,517</div>	FILING DATE <div style="text-align: center;">11/18/99</div>	CLASS <div style="text-align: center;">709</div>	GROUP ART UNIT <div style="text-align: center;">2756</div>	ATTORNEY DOCKET NO.
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APPLICANT

DAVID BRADLEY RUST, SANDIEGO, CA.

  
  

**\*\*CONTINUING DOMESTIC DATA\*\*\*\*\***  
 VERIFIED  
*me MMM*

  

**\*\*371 (NAT'L STAGE) DATA\*\*\*\*\***  
 VERIFIED  
*me MMM*

  
  
  

**\*\*FOREIGN APPLICATIONS\*\*\*\*\***  
 VERIFIED  
*me MMM*

  
  
  

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 12/21/99 \*\* SMALL ENTITY \*\*

Foreign Priority claimed 35 USC 119 (a-d) conditions met <div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> yes <input checked="" type="checkbox"/> no  <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance           </div>	STATE OR COUNTRY <div style="text-align: center;">CA</div>	SHEETS DRAWING <div style="text-align: center;">8</div>	TOTAL CLAIMS <div style="text-align: center;">16</div>	INDEPENDENT CLAIMS <div style="text-align: center;">3</div>
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Verified and Acknowledged *MMM*  
Examiner's Initials Initials

  

ADDRESS

SEE CUSTOMER NUMBER: 022249

  

TITLE

SYSTEM AND MEHTOD FOR APPLICATION VIEWING THROUGH COLLABORATIVE WEB  
 BROWSING SESSION

  

FILING FEE RECEIVED  <div style="text-align: center;">\$380</div>	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<div style="display: flex; flex-direction: column;"> <input type="checkbox"/> All Fees           <input type="checkbox"/> 1.16 Fees (Filing)           <input type="checkbox"/> 1.17 Fees (Processing Ext. of time)           <input type="checkbox"/> 1.18 Fees (Issue)           <input type="checkbox"/> Other _____           <input type="checkbox"/> Credit         </div>
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CONFIRMATION NO. 5984

<b>SERIAL NUMBER</b> 09/442,517	<b>FILING DATE</b> 11/18/1999 <b>RULE</b>	<b>CLASS</b> 709	<b>GROUP ART UNIT</b> 2157	<b>ATTORNEY DOCKET NO.</b> 027060.0011.UTL
<b>APPLICANTS</b> DAVID BRADLEY RUST, SAN DIEGO, CA;  <b>** CONTINUING DATA *****</b> <i>none MMM</i> <b>** FOREIGN APPLICATIONS *****</b> <i>none MMM</i> <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> <b>** 12/21/1999</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>MMM</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 8	<b>TOTAL CLAIMS</b> 25
		<b>INDEPENDENT CLAIMS</b> 4		
<b>ADDRESS</b> 36183				
<b>TITLE</b> SYSTEM AND METHOD FOR APPLICATION VIEWING THROUGH COLLABORATIVE WEB BROWSING SESSION				
<b>FILING FEE RECEIVED</b> 600	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	